2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#711808

Name:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

MUNCY, JESSICA

RUTH, CHRISTY

VALRICO, FL 33594

MCCOY, JOHANNA

SEFFNER, FL

BRANDON, FL 33510

416 WINDHORST ROAD, E

2109 ARBOR OAKS DRIVE

() Delete

() Delete

2414 KINGSWAY ROAD P.O. BOX 12

Current Principal Place of Business:

Entity Name: PRESBYTERIAN CHURCH OF SEFFNER, INC.

FILED Jan 21, 2002 8:00 AM Secretary of State

New Principal Place of Business:

1906 SOUTH LENNA AVENUE SEFFNER, FL 33584 **Current Mailing Address: New Mailing Address:** 1906 SOUTH LENNA AVENUE P O BOX 545 SEFFNER, FL 33583 FEI Number: 00-7118089 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCCOY, JOHANNA SMITH, RONALD E 2414 KINGSWAY ROAD 10552 TAYLOR ROAD SEFFNER, FL 33584 THONOTOSASSA, FL 33592 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: RONALD E. SMITH 01/21/2002 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition MCCOY, RAYMOND Name: Name: 2414 KINGSWAY ROAD Address: Address: City-St-Zip: SEFFNER, FL 33584 City-St-Zip: Title: () Delete Title: () Change () Addition HENDERSON, TAMMY Name: Name: Address: 502 US HWY 92E Address: City-St-Zip: SEFFNER, FL 33584 City-St-Zip: Title: () Delete Title: () Change () Addition THATCHER, DEBORAH Name: Name: 5210 ORANGE AVENUE Address: Address: City-St-Zip: SEFFNER, FL 33584 City-St-Zip: Title: TD () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

SIGNATURE: RONALD E. SMITH SIGNATURE: SD 01/21/2002

() Change () Addition

(X) Change () Addition

SMITH. RONALD E

10552 TAYLOR ROAD THONOTOSASSA, FL 33592 US